PS Form 3811, February 2004

| SENDER: COMPLETE THIS SECTION | |
|--|--|
| | COMPLETE THIS SECTION ON DELIVERY |
| Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. | A. Signature X M arlene Town C. Date of Delivery Marlene Town 3/21/67 |
| 1. Article Addressed to: | D. Is delivery address different from item 1? Yes If YES, enter delivery address below: No. No |
| | 3. Service Type Certified Mail Registered Receipt for Merchandise C.O.D. Restricted Delivery? (Extra Fee) Yes |
| 2. Article Number | |
| (Transfer from ser /UU5UU0 | 12 2962 0396 |
| PS Form 3811, February 2004 Domestic Ret | turn Receipt 102595-02-M1540 |
| SENDER: COMPLETE THIS SECTION | COMPLETE THIS SECTION ON DELIVERY |
| Oomplete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse | A. Signature X. M. Quiller J. Oyur II Agent Addressee |
| so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. | B. Received by (Printed Name) C. Date of Delivery Carlene Fowell 32/167 D. Is delivery address different from item 1? Yes |
| Article Addressed to: | If YES, enter delivery address below: |
| Lt. Welch Lee County Sheriff's Office 2311 Gateway Drive Suite 130 Opelika, Al 36801 | 3:01 CV 24/ |
| | C+5 40 |
| | 3. Service Type Certified Mail Express Mail Registered Return Receipt for Merchandise Insured Mail C.O.D. |
| | |
| 2. Article Number | 4. Restricted Delivery? (Extra Fee) ☐ Yes |

Domestic Return Receipt

| SENERO COMO ETT THE | |
|--|--|
| SENDER: COMPLETE THIS SECTION | COMPLETE THIS SECTION ON DELIVERY |
| Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. | A. Signature X. A. Carley Powell Agent Addressee B. Received by (Printed Name) Marlene Powell 3/2/167 |
| Article Addressed to: | D. Is delivery address different from item 1? |
| | 3:01cv24/ c+0 |
| 2311 Gateway Drive Suite 130 Opelika, Al 36801 | 3. Service Type Certified Mail Registered Return Receipt for Merchandise C.O.D. |
| O. A. W. I. M. | 4. Restricted Delivery? (Extra Fee) ☐ Yes |
| 2. Article Number 7005 1160 00 | PAEO 54P5 10 |
| PS Form 3811, February 2004 Domestic Retu | rn Receipt 102595-02-M-1540 |